CERTIFICATE OF EXPRESS MAILING UNDER 37 CFR 1.10

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I hereby certify that this paper or fee is being deposited with the United States Postal Service Express Mail Post Office To Addressee' service under FR 1.10 and is addressed to the Commissioner for Patents, Mail Stop Patent Applications, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date: 9/10/2003

commissioner for Patents

Stop Patent Applications

P.O. Box 1450

Alexandria, Virginia 22313-1450

Dear Sir:

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Transmitted herewith for filing is the U. S. patent application of:

Inventor(s): Gregory A. Piccionelli, Michael M. Gerardi For: REMOTE PERSONALIZATION METHOD

We are transmitting herewith the attached:

- x Transmittal sheet containing Certificate under 37 CFR 1.10.
- x Patent Application: Spec. 10 pgs, including 3 pg. of claims; Abstract 1 pg.
- x The fee has been calculated as shown below in the Calculation of Fees table.
- Design Patent Application: Spec. pgs.
- x 4 Sheets of Informal Drawings (5 Figures).
- Certified copy of a application, Serial No., filed, the right of priority of which is claimed under 35 U.S.C. 119. ____ Will follow.
- Application claims the right of priority of provisional application, under 35 U.S.C. 120.
- Small entity status is claimed under 37 CFR 1.9 and 1.27.
- x A signed Combined Declaration and Power of Attorney.
- An unsigned Combined Declaration and Power of Attorney.
- An associate Power of Attorney.
- Assignment of the invention to

Recordation Form Cover Sheet.

- \underline{x} A credit card payment form authorizing a charge in the amount of \$375.00 to cover the Filing Fee
- PAYMENT OF FEES IS BEING DEFERRED.
- The fee \$40.00 to cover the Assignment Recordation (included in check #)
- Computer readable form of . Applicants state that the paper copy form of the section of the present application, and the computer readable form submitted herewith, are the same.
- Information Disclosure Statement with form PTO-1449.
- x Return postcard

CALCULATION OF FEES

ITEM		NUMBER OF CLAIMS FILED MINUS BASE*	NUMBER OF CLAIMS OVER BASE x RATE	\$ AMOUNT	\$ FEE
A	TOTAL CLAIMS FEE	20- 20" = 0	0 x \$9 00	\$	
В	INDEPENDENT CLAIMS FEE**	3- 3* = 0	0 x \$ 12.00	S	
С	SMALL ENTITY FEE = A + B SUBTOTAL LARGE ENTITY FEE = 2 x (A + B)			\$	
D	SMALL ENTITY FEE = \$370.00 BASIC FEE* LARGE ENTITY FEE = \$740.00				\$ 375.00
E	SMALL ENTITY FEE = \$140.00 MULTIPLE-DEPENDENT CLAIMS FEELARGE E	√TTTY FEE = \$280.00			5- 0-
F	ASSIGNMENT RECORDING FEE \$ 40.00				s
G	TOTAL FEE (ADD LINES C, D, E AND F)				\$375.00
	**LIST INDEPENDENT CLAIMS (1,5)				

_	Please charge my Deposit Account No. xxxxxxxx the amount of \$ A copy of this letter is enclosed.
_	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. xxxxxxxx. A duplicate copy of this sheet is enclosed. Any additional filing fees required under 37 CFR 1.16. Any patent application processing fees under 37 CFR 1.17.
	The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. xx-xxxx. A copy of this letter is enclosed. Any patent application processing fees under 37 CFR 1.17. The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b). Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Date: 9/10/03

MMG/
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Respectfully submitted,

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